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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 Chapter 11 |
| | Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|--|----------------------------|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | Anita | |
| AACS to the consequence of the Consequence | First name | First name |
| Write the name that is on your government-issued | N. della caraca | N. della va ava a |
| picture identification (for example, your driver's | Middle name | Middle name |
| license or passport | Metcalf Last name | Last name |
| Bring your picture | | |
| identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| | | |
| 2. All other names you have used in the last | First name | First name |
| 8 years | | |
| Include your married or | Middle name | Middle name |
| maiden names. | To a second | Test seement and the seement a |
| | Last name | Last name |
| | First name | First name |
| | | |
| | Middle name | Middle name |
| | Last name | Last name |
| | Lastriano | Lactification |
| 3. Only the last 4 digits of your Social | XXX - XX- 9484 | XXX - XX- |
| Security number or federal Individual | OR | OR |
| Taxpayer | 9 xx - xx- | 9 xx - xx- |
| Identification number (ITIN) | | |

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| Debtor 1 Anita First Name | Metcalf Middle Name Last Name | Case number (if known) |
|--|---|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the last | Business name | Business name |
| 8 years | Business name | Business name |
| Include trade names and doing business as names | EIN | EIN |
| | EIN | EIN |
| 5. Where you live | 8228 S Comell Ave | If Debtor 2 lives at a different address: |
| | Number Street | Number Street |
| | Chicago Illinois 60617 City State Zip Code | City State Zip Code |
| | Cook | <u></u> |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | Number Street |
| | City State Zip Code | City State Zip Code |
| 6. Why you are choosing this district | Check one: | Check one: |
| to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | |
| | | |
| | | |
| | | |
| | | |

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| De | ebtor 1 Anita | | Metcalf | | Case number (if kno | own) | |
|-----|---|--|--|---|---|--|---|
| | First Name | Middle Nam | e Last Name | | | | |
| Pa | rt 2: Tell the Court Abo | ut Your Bankrup | tcy Case | | | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | brief description of each, see B2010)). Also, go to the top of | | | | ndividuals Filing for |
| 8. | How you will pay the fee | more details a cashier's chec may pay with I need to pay Individuals to: I request that judge may, but the official poyou choose the | entire fee when I file my about how you may pay. Tyck, or money order. If your a credit card or check with the fee in installments. If a Pay Your Filing Fee in Installment is not required to, waive overty line that applies to your got in option, you must fill out and file it with your petition | ypically, if you attorney is so a pre-printer of you choose stallments (Omay request a your fee, an our family signs the Application of the printer of your fee, and our family signs the Application of the printer of | ou are paying the submitting your ed address. This option, sig fficial Form 103 this option only d may do so on ze and you are u | e fee yourself, payment on your and attach to A). If you are filing the your incorunable to pay to the pay to the pay to the your incorunable to to the | you may pay with cash, our behalf, your attorney the Application for ag for Chapter 7. By law, a me is less than 150% of the fee in installments). If |
| 9. | Have you filed for bankruptcy within the last 8 years? | No. Yes. District District | Northern District of Illinois | When When When | 4/1/2011 MM / DD / YYYY MM / DD / YYYY | Case number _ Case number _ Case number _ | 11-bk-14102 |
| 10 | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No. Yes. Debtor District Debtor District | | When When | MM / DD / YYYY | Relationship to Case number, Relationship to Case number, | you |
| 11. | Do you rent your residence? | ✓ No. | e 12. r landlord obtained an evictio Go to line 12. Fill out <i>Initial Statement About</i> this bankruptcy petition. | | | st You (Form 10 | 1A) and file it with |

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Debtor 1 Anita Metcalf Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? Ⅵ I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Anita Metcalf Case number (if known)

First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for

waiver of credit counseling with the court.

waiver of credit counseling with the court.

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Debtor 1 Anita Metcalf Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded □ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **1**-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do vou estimate that you owe? 100-199 10,001-25,000 More than 100,000 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Anita Metcalf Signature of Debtor 1 Signature of Debtor 2 4/10/2018 Executed on Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Anita | | Metcalf | Case number (if | known) |
|--|----------------------------|--------------------------|--------------------------|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | ler Chapter 7, 11, 12, o | or 13 of title 11, Unite | nave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the |
| If you are not | debtor(s) the notice requi | ired by 11 U.S.C. § 34 | 2(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I |
| represented by an | | | | lules filed with the petition is incorrect. |
| attorney, you do not | _ | . , | | • |
| need to file this page. | /s/ Alicia Haro | | Date _ | 4/10/2018 |
| | Signature of Attorney for | or Debtor | M | IM / DD / YYYY |
| | | | | |
| | | | | |
| | Alicia Haro | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 11101 S. Western Aver | nue | | |
| | Street | | | |
| | | | | |
| | | | | 00040 |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | Contact phone | | Email address | aharo@semradlaw.com |
| | · — | | | |
| | | | Illinois | |
| | Bar number | | State | |

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| Fill in this infor | mation to identify your c | ase: | |
|---------------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Anita | | Metcalf |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| Case number (If known) | | | (State) |

| Check if this is an |
|---------------------|
| amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|--------------------------------------|
| . Schedule A/B: Property (Official Form 106A/B) | \$7,000.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$4,000.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$11,000.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | ¢7,800,00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$7,800.00 |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$14,216.98 |
| Your total liabilities | \$22,016.98 |
| art 3: Summarize Your Income and Expenses | |
| . Schedule I: Your Income (Official Form 106I) | |
| Copy your combined monthly income from line 12 of Schedule I | \$2,766.24 |
| Copy your combined montally income normalized to Screening | |
| . Schedule J: Your Expenses (Official Form 106J) | \$2,616.00 |

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| Del | btor 1 Anita | | Metcalf | Case number (if known) | |
|-------------|---|------------------------------|---|---|------------|
| | First Name | Middle Name | Last Name | | |
| Part | 4: Answer These Ques | tions for Administrati | ve and Statistical Recor | ds | |
| 6. / | Are you filing for bankruptcy | under Chapters 7, 11, or | 13? | | |
| | <u> </u> | port on this part of the for | m. Check this box and submi | t this form to the court with your other so | chedules. |
| | ✓ Yes. | | | | |
| 7. \ | What kind of debt do you hav | e? | | | |
| | | | ner debts are those incurred b Il out lines 8-10 for statistical p | y an individual primarily for a personal, ourposes. 28 U.S.C. § 159. | |
| | Your debts are not prima this form to the court with | | u have nothing to report on th | is part of the form. Check this box and s | ubmit |
| 8. | From the Statement of Your Form 122A-1 Line 11; OR , Fo | | | thly income from Official | \$3,240.18 |
| 9. | Copy the following special | categories of claims from | n Part 4, line 6 of Schedule | E/F: | |
| | From Part 4 on Schedule E | /F, copy the following: | | Total claim | |
| | 9a. Domestic support obligat | ions (Copy line 6a.) | | \$0.00 | |
| | 9b. Taxes and certain other of | ebts you owe the governm | nent. (Copy line 6b.) | \$0.00 | |
| | 9c. Claims for death or perso | nal injury while you were ir | toxicated. (Copy line 6c.) | \$0.00 | |
| | 9d. Student loans. (Copy line | e 6f.) | | \$0.00 | |
| | 9e. Obligations arising out of priority claims. (Copy line 6g. | | divorce that you did not repo | t as \$0.00 | |
| | 9f. Debts to pension or profit | -sharing plans, and other s | similar debts. (Copy line 6h.) | \$0.00 | |
| | | | | | |

\$0.00

9g. **Total.** Add lines 9a through 9f.

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| Schedule A/B: Property In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, | Fill in this | information to identify your ca | ase: | | | |
|---|--|--|---|---|---|---------------------------|
| Debtor 2 Shows Middle Name Last Name Middle Name Last Name Debtor 2 Shows Debtor 3 Shows Deb | Debtor 1 | Anita | | Metcalf | | |
| United States Barkruptcy Court for the: Northum | | | Middle Na | | | |
| Case number Check if this is an amended filling | | ling) First Name | Middle Na | ame Last Name | | |
| Official Form 106A/B Schedule A/B: Property In such setapory, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (fix flows). Answer every question. Por 12 Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? 1. 1 Smeet address, if available, or other description in the property of the condominum or cooperative interest (auch as fee simple, teanney by interest (auch as fee simple, teanney | United Sta | ates Bankruptcy Court for the: | Northern | | | |
| Schedule A/B: Property in each category, separately list and describe items. List an asset only once. If an asset this in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally write your name and case number (if known). Answer every question. But I Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? 1. Street address, if available, or other description TLC Resonts Number Street Clark County What is the property Who has an interest in the property? Check all that apply. If you own or have more than one, list here: Who has an interest in the property? Check all that apply. If you own or have more than one, list here: If you own or have more than one, list here: If you own or have more than one, list here: Who has an interest in the property? Check all that apply. If you own or have more than one, list here: Who has an interest in the property? Check all that apply. If you own or have more than one, list here: Who has an interest in the property? Check all that apply. If you own or have more than one, list here: Who has an interest in the property? Check all that apply. If you own or have more than one, list here: Who has an interest in the property? Check all that apply. If you own or have more than one, list here: If you own or have more than one, list here: Who has an interest in the property? Check all that apply. If you own or have more than one, list here: Who has an interest in the property? Check all that apply. If you own or have more than one, list here: Who has an interest in the property? Check all that apply. If you own or have more than one, list here: Who has an interest in the property? Check all that apply. If you own or have more than one, list here: Who has an interest in the property | | ber | | (5.0.0) | | |
| In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally additional pages, write your name and case number (if known). Answer every question. The property of the property of the property? The property of the property? In a vegas is property. In a vegas is property. In a vegas is property. If you own or have more than one, list here: Who has an interest in the property? Check all that apply. If you own or have more than one, list here: What is the property of the property of the category is the property. Which has an interest in the property? Check all that apply. If you own or have more than one, list here: What is the property? Check all that apply. In the amount of any secured claims or evenptions. Put the amount of any secured claims or evenptions. Put the amount of any secured claims or become to the current value of the entire property? \$7000.00 Current value of the current value of the entire property? It is a vegas in a vegas | Officia | I Form 106A/B | | | | |
| ategory where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, it more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In | Sched | dule A/B: Prope | rty | | | 12/1 |
| No. Go to Part 2 Yes. Where is the property? Yes. Yes. Yes. Yes. Yes. Yes. Yes. Yes. | category v responsibl write your | where you think it fits best. E e for supplying correct infor name and case number (if k | Be as complete an mation. If more sp nown). Answer ev | d accurate as possible. If two married peop ace is needed, attach a separate sheet to t ery question. | le are filing together, both a his form. On the top of any a | re equally |
| Yes. Where is the property? Street address, if available, or other description TLC Resorts Number Street 1 South Main Street 2 State 2 Street address, if available, or other description If you own or have more than one, list here: What is the property? Check all that apply. Street address, if available, or other description What is the property? Check all that apply. Street address, if available, or other description What is the property? Check all that apply. Street address, if available, or other description What is the property? Check all that apply. Street address, if available, or other description What is the property? Check all that apply. Street address, if available, or other description What is the property? Check all that apply. Street address, if available, or other description What is the property? Check all that apply. Street address, if available, or other description What is the property? Check all that apply. So not deduct secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptio | 1. Do you | | uitable interest ii | n any residence, building, land, or similar pr | operty? | |
| Street address, if available, or other description TLC Resorts Number Street Suret south Main Street Manufactured or mobile home Land Investment property Timeshare Other Other Other or other description Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Street address, if available, or other description Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Duplex or multi-unit building Condominium or cooperative Current value of the entire property Check all that apply. Debtor 1 only Gee instructions) Do not deduct secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured by Property. Number | | | | | | |
| Number Street South Main Street South | 1.1 | | other description | Single-family home | the amount of any secu | red claims on Schedule D: |
| Investment property | | Number Street | | Condominium or cooperative | entire property? | portion you own? |
| Other Who has an interest in the property? Check one. Check if this is community property (see instructions) Check if this is community property Check one. Check on | | City State | | Investment property | interest (such as fee s | simple, tenancy by |
| Who has an interest in the property? Check one. Debtor 1 only | | | | Other | · | |
| If you own or have more than one, list here: Street address, if available, or other description Single-family home Duplex or multi-unit building Condominium or cooperative Duplex or multi-unit building Current value of the entire property? City State Zip Code City State Zip Code City State Zip Code Check if this is community property Check one. | | | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | mmunity property |
| What is the property? Check all that apply. Street address, if available, or other description Single-family home Single-family home Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Check if this is community property (see instructions) | If | | al la sur | property identification | iis item, such as local | |
| Current value of the entire property? Number Street Number Street Current value of the entire property? Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one. Current value of the entire property? Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. | | | | Single-family home | the amount of any secu | red claims on Schedule D: |
| Number Street Investment property City State Zip Code Investment property Timeshare Other Who has an interest in the property? Check one. Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Check if this is community property (see instructions) | | | | Condominium or cooperative Manufactured or mobile home | | |
| Who has an interest in the property? Check (see instructions) one. | | | Zip Code | Investment property Timeshare | interest (such as fee s | simple, tenancy by |
| Debtor 1 only | | | | | | mmunity property |
| Debtor 2 only Debtor 1 and Debtor 2 only | | | | Debtor 2 only | _ | |
| At least one of the debtors and another Other information you wish to add about this item, such as local | | | | At least one of the debtors and another | nis item, such as local | |

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| Debtor 1 | | | Metcalf | Case number (if known) | |
|----------------------------|---|--|--|---|---|
| | First Name | Middle Name | Last Name | | |
| | et address, if available, or ot | her description Zip Code | Last Name What is the property? Check all that ap Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Debtor 1 only | Current value of the entire property? Describe the nature interest (such as fithe entireties, or a Check if this interest) | portion you own? re of your ownership ee simple, tenancy by life estate), if known. s community property |
| | | ı | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anote Other information you wish to add abproperty identification number: | out this item, such as local | |
| | the dollar value of the po ve attached for Part 1. Wi | - | all of your entries from Part 1, includ nere. ▶ | ing any entries for pages | \$7000.00 |
| Do you ow you own t | hat someone else drives. If yours, trucks, tractors, sport ut | equitable interestyou lease a vehicle, | t in any vehicles, whether they are realso report it on Schedule G: Executory cycles | - | les |
| 3.1 | Make Model: Year: | Volkswagen Jetta 2006 | Who has an interest in the prope one. Debtor 1 only | the amount of any | ured claims or exemptions. Put secured claims on <i>Schedule D:</i> e Claims Secured by Property. |
| | Approximate mileage: Other information: 2006 Volkswagen Jetta | 145000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community prince the second community prince the sec | | he Current value of the portion you own? \$2600.00 |
| 3.2 | Make Model: Year: | | Who has an interest in the prope one. Debtor 1 only | the amount of any | ured claims or exemptions. Put secured claims on <i>Schedule D:</i> e Claims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community prinstructions) | | he Current value of the portion you own? |

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| ו וטוטו | Anita | | Metcalf Case num | Del (II KNOWN) | |
|---------|---|-------------|---|--|---|
| | First Name | Middle Name | Last Name | | |
| 3.3 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D</i> aims Secured by Property. Current value of the portion you own? |
| | | | At least one of the debtors and another Check if this is community property (see instructions) | | |
| 3.4 | Make Model: Year: Approximate mileage: | | Who has an interest in the property? Check one. Debtor 1 only | the amount of any secu | claims or exemptions. Put ured claims on Schedule D aims Secured by Property. |
| | Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | | | At least one of the debtors and another Check if this is community property (see | | |
| | | • | instructions) er recreational vehicles, other vehicles, and ac , fishing vessels, snowmobiles, motorcycle access | cessories | |
| | | • | instructions) er recreational vehicles, other vehicles, and ac | cessories ories Do not deduct secured | • |
| Exar | mples: Boats, trailers, motors, p No Yes Make | • | instructions) er recreational vehicles, other vehicles, and act, fishing vessels, snowmobiles, motorcycle access. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | cessories ories Do not deduct secured the amount of any secu | ıred claims on <i>Schedule D</i> |
| Exar | nples: Boats, trailers, motors, p No Yes Make Model: Year: Approximate mileage: | • | instructions) er recreational vehicles, other vehicles, and act, fishing vessels, snowmobiles, motorcycle access. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured the amount of any secured the deduct secured the amount of the Check Current value of the | red claims on Schedule Laims Secured by Property. Current value of the |
| 4.1 | Make Model: Other information: Make Model: Year: Make Model: Year: Make Model: Year: | • | instructions) Per recreational vehicles, other vehicles, and acceptance, fishing vessels, snowmobiles, motorcycle access. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured the amount of any secured the entire property? Do not deduct secured the entire property? | claims or Schedule Laims Secured by Property. Current value of the portion you own? claims or exemptions. Pured claims on Schedule Laims. |
| 4.1 | Make Model: Other information: Make Model: Approximate mileage: Other information: | • | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another check if this is community property (see instructions) Who has an interest in the property? Check one. | Do not deduct secured the amount of any secured the entire property? Do not deduct secured the entire property? | |

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Debtor 1 Anita Metcalf Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Living Room Set, Dining Room Set, Bedroom Set \$800.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... TVs, Cell Phone \$500.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$100.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1400.00 for Part 3. Write that number here

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Debtor 1 Anita Metcalf Case number (if known) First Name Middle Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: U.S. Bank \$0.00 17.2. Checking account: 17.3. Savings account: \$0.00 U.S. Bank 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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| Deb | tor 1 Anita First Name | Middle Name | Metcalf Last Name | Case number (if known) | |
|-----|--|---|-------------------------------|--|--------|
| 20. | Negotiable instruments Non-negotiable instrume No No No Yes. Give specific | orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfe | checks, promissory note | s, and money orders. | |
| | information about them | Issuer name: | | | |
| 21. | | | , thrift savings accounts, | or other pension or profit-sharing plans | _ |
| | No✓ Yes. List each | Type of account: | Institution name: | | |
| | account | 401(k) or similar plan: | 403B | | \$0.00 |
| | separately. | Pension plan: | | | - |
| | | IRA: | | | _ |
| | | Retirement account: | _ | | |
| | | Keogh: | _ | | |
| | | Additional account: | | | - |
| | | Additional account: | | | - |
| 22. | | prepayments I deposits you have made so that with landlords, prepaid rent, public | | | |
| | ✓ No | | Institution name: | | |
| | Yes | Electric: | | | _ |
| | | Gas: | | | |
| | | Heating oil: | | | _ |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | _ |
| | | Telephone: | | | _ |
| | | Water: | | | _ |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract fo | or a periodic payment of money to | you, either for life or for a | a number of years) | |
| | ✓ No Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |

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| Debt | or 1 Anita | Metcalf | Case number (if known) | |
|------|--|---|---------------------------------------|--|
| | First Name Middle | | | |
| 24. | Interests in an education IRA, in an acc 26 U.S.C. §§ 530(b)(1), 529A(b), and 529 | count in a qualified ABLE program, or und (b)(1). | er a qualified state tuition program. | |
| | No Institution name and descri | ption. Separately file the records of any interes | sts.11 U.S.C. § 521(c): | |
| | | | | |
| 25. | Trusts, equitable or future interests in exercisable for your benefit | property (other than anything listed in line | e 1), and rights or powers | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| 26. | | secrets, and other intellectual property es, proceeds from royalties and licensing agre | eements | |
| | No Yes. Describe | | | |
| | | | | |
| 27. | Licenses, franchises, and other genera <i>Examples:</i> Building permits, exclusive licen | l intangibles ses, cooperative association holdings, liquor | licenses, professional licenses | |
| | No Yes. Describe | | | |
| | | | | |
| Mor | ney or property owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to you | | | · |
| | No No | | | |
| | Yes. Give specific information about them, including whether | | Federal: | \$0.00 |
| | you already filed the returns and the tax years | | State: Local: | \$0.00 \$0.00 |
| 29. | Family support Examples: Past due or lump sum alimony, | spousal support, child support, maintenance | | |
| | No No | | | |
| | No Yes. Give specific information | | Alimony: | \$0.00 |
| | | | Maintenance: | \$0.00 |
| | | | Support: | \$0.00 |
| | | | Divorce settlement: | \$0.00 |
| | | | Property settlement: | \$0.00 |
| 30. | | ce payments, disability benefits, sick pay, vac oans you made to someone else | ation pay, workers' compensation, | |
| | No No | | | |
| | Yes. Describe | | | |

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| Deb | tor 1 Anita | | Metcalf | Case number (if known) | |
|------|--|-----------------------------|---|---|--|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance Examples: Health, disab | | alth savings account (HSA); credit, I | nomeowner's, or renter's insurance | |
| | No Yes. Name the insu of each policy and | | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | | y of a living trust, expect | someone who has died proceeds from a life insurance police | ey, or are currently entitled to receive | |
| 33. | | | you have filed a lawsuit or made urance claims, or rights to sue | a demand for payment | |
| 34. | Other contingent and to set off claims No Yes. Describe | unliquidated claims o | fevery nature, including counter | claims of the debtor and rights | |
| 35. | Any financial assets y No Yes. Describe | ou did not already list | | | |
| 36. | | • | m Part 4, including any entries f | | |
| Part | 5: Describe Any B | usiness-Related Pro | operty You Own or Have an I | nterest In. List any real estate in I | Part 1. |
| 37. | Do you own or have an No. Go to Part 6. Yes. Go to line 38. | ny legal or equitable in | terest in any business-related p | operty? | Current value of the portion you own? Do not deduct secured claims |
| 38. | Accounts receivable | or commissions you alr | eady earned | | or exemptions |
| | Yes. Describe | | | | |
| 39. | | | e, modems, printers, copiers, fax m | achines, rugs, telephones, desks, chairs, | electronic devices |
| | Yes. Describe | | | | |
| | | | | | |

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| Deb | tor 1 Anita | Metcalf Case number (if) | (nown) |
|--------|--------------------------------|---|------------------------------|
| ı | First Name | Middle Name Last Name | |
| 40. | Machinery, fixtures, e | equipment, supplies you use in business, and tools of your trade | |
| | ✓ No | | |
| | Yes. Describe | | |
| | | | |
| | - | | |
| 41. | Inventory | | |
| | ✓ No | | |
| | Yes. Describe | | |
| | Ш | | |
| | | | |
| 42. | Interests in partnersh | ips or joint ventures | |
| | ✓ No | | |
| | Yes. Give specific | Name of entity: % of | ownership: |
| | information about | | |
| | them | | |
| | | | |
| | | | |
| 43. | Customer lists, mailing | lists, or other compilations | |
| | — | • | |
| | ✓ No | | |
| | Yes. Do your lists I | nclude personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| | ☐ No | | |
| | Yes. Desc | ribe | |
| | | | |
| 44. | Any business-related | property you did not already list | |
| | ✓ No | | |
| | lacktriangle | | |
| | Yes. Give specific information | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | <u> </u> |
| | | | |
| | | all of your entries from Part 5, including any entries for pages you have attache | |
| for Pa | art 5. Write that number | er here | |
| | Describe Any F | arm- and Commercial Fishing-Related Property You Own or Have an | Interest In |
| Part | If you own or have an | n interest in farmland, list it in Part 1. | 11101001111 |
| 46 | | | |
| 46. | Do you own or have a | ny legal or equitable interest in any farm- or commercial fishing-related proper | Current value of the |
| | ✓ No. Go to Part 7. | | portion you own? |
| | Yes. Go to line 47. | | Do not deduct secured claims |
| | _ | | or exemptions |
| 47. | Farm animals | author farms using all fine | |
| | Examples: Livestock, p | OUITRY, TARTTI-FAISEO TISN | |
| | ✓ No | | |
| | Yes. Describe | | |
| | | | |
| | | | |

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| Deb | tor 1 Anita | | Metcalf | Case number (if known) | |
|--------------|--|----------------------|---------------------------|------------------------------|-------------|
| | | dle Name | Last Name | | |
| 48. | Crops-either growing or harvested | | | | |
| | √ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 10 | | | | | |
| 49. | Farm and fishing equipment, impleme | nts, machinery, fixt | ures, and tools of trade | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 50 | Farm and fishing supplies, chemicals, | and feed | | | |
| 00. | _ | una 100a | | | |
| | No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 51. | Any farm- and commercial fishing-rela | ated property you di | id not already list | | |
| | No | | | | |
| | Yes. Describe | | | | |
| | Tos. Boscilbo | | | | |
| | | | | | |
| 52 A | dd the dollar value of all of your entries | s from Part 6 includ | ling any entries for nage | es vou have attached | |
| | art 6. Write that number here | | | | |
| • | | | | L | |
| | | | | | |
| | | | | | |
| Part | 7: Describe All Property You Ow | n or Have an Inte | erest in That You Did | Not List Above | |
| 53. | | | y list? | | |
| | Examples: Season tickets, country club m | iembership | | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| | | | | | |
| 54. A | dd the dollar value of all of your entries | from Part 7. Write | that number here | | <u> </u> |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Part | 8: List the Totals of Each Part of | this Form | | | |
| rare | o. Elot the Totals of Edon't dit of | 4110101111 | | | |
| 55. | Part 1: Total real estate, line 2 | | | | \$7000.00 |
| | | | | | |
| 56. | part 2 total vehicles, line 5 | | \$2600.00 | | |
| 57. F | Part 3: Total personal and household ite | ems, line 15 | | _ | |
| | - | , | \$1400.00 | <u> </u> | |
| 58.F | Part 4: Total financial assets, line 36 | | | <u> </u> | |
| 59. | Part 5: Total business-related property, | , line 45 | | | |
| 60. | Part 6: Total farm- and fishing-related p | property, line 52 | | | |
| 61 | Part 7: Total other property not listed, I | line 54 | _ | _ | |
| | | | | | |
| 62. | Total personal property. Add lines 56 thr | ough 61 | \$4000.00 | _ | + \$4000.00 |
| | | | | Copy personal property total | |
| | | | | | \$11000.00 |
| 63. 1 | Total of all property on Schedule A/B. Ad | dd line 55 + line 62 | | | |

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|--------------------------|---|---|---|---|--|--|
| Fill | in this inforr | nation to identify your case: | | | | |
| Deb | otor 1 | Anita | | Metcalf | | |
| Dok | otor O | First Name | Middle Name | Last Nam | ne | |
| | otor 2 ouse, if filing) | First Name | Middle Name | Last Nam | ne e | |
| Uni | ted States B | ankruptcy Court for the: Northe | ern D | istrict of Illino | pis | |
| Cas | se number | | | (Stat | te) | |
| | nown) | | | | | _ |
| Of | ficial I | Form 106C | | | | Check if this is an amended filing |
| | | C: The Property | You Claim a | s Exem | tan | 04/16 |
| For stat the tax-und you | each iten e a specif amount o exempt re ler a law t r exempti | es, write your name and case n of property you claim as a ic dollar amount as exemp f any applicable statutory le tirement funds—may be u | e number (if known) exempt, you must s ot. Alternatively, you imit. Some exempt unlimited in dollar a a particular dollar applicable statutor |). specify the u may clain tions—such imount. Ho amount an | amount of the exemption you cla n the full fair market value of the n as those for health aids, rights t wever, if you claim an exemption | property being exempted up to co receive certain benefits, and |
| 1. | Which set | of exemptions are you claiming | ng? Check one only, ev | en if your spo | ouse is filing with you. | |
| | ✓ You a | are claiming state and federal r | onbankruptcy exemp | tions. 11 U.S | S.C. § 522(b)(3) | |
| | You a | re claiming federal exemptions | s. 11 U.S.C. § 522(b)(2 | 2) | | |
| 2. | For any p | operty you list on Schedule A | B that you claim as e | xempt, fill in | the information below. | |
| | | ription of the property and hedule A/B that lists this | Current value of the portion you own | | the exemption you claim one box for each exemption. | Specific laws that allow exemption |

Copy the value from Schedule A/B

\$0.00

\$0.00

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

✓

V

\$0

\$0

100% of fair market value, up to any

100% of fair market value, up to any

applicable statutory limit

applicable statutory limit

No Yes

Brief

description:

Line from Schedule A/B:

description:

Line from Schedule A/B:

Bank

Checking account, U.S.

Savings account, U.S.

17

Are you claiming a homestead exemption of more than \$160,375?

735 ILCS 5/12-1001(b)

735 ILCS 5/12-1001(b)

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Debtor 1 Anita Metcalf Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(c); 735 ILCS Brief \$2,600.00 5/12-1001(b) description: \checkmark \$1,800.00; \$0.00 Volkswagen Jetta, 2006, 100% of fair market value, up to any 2006 Volkswagen Jetta applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$800.00 description: $\overline{}$ \$800.00 Living Room Set, Dining 100% of fair market value, up to any Room Set, Bedroom Set applicable statutory limit Line from Schedule A/B: 06 735 ILCS 5/12-1001(b) Brief description: \$500.00 $\overline{}$ \$500.00 TVs, Cell Phone 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 07 Brief 735 ILCS 5/12-1006 \$0.00 description: \$0 401(k) or similar plan, 100% of fair market value, up to any 403B applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(a) Brief \$100.00 description:

\$100.00

100% of fair market value, up to any

applicable statutory limit

Used Clothing

Line from

Schedule A/B:

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| Fill in | this inform | nation to identify your cas | se: | | | | |
|------------------|---------------------------|--|------------------------------|--|--|---|--------------------------|
| | | | | Matasif | | | |
| Debto | or i | Anita First Name | Middle Name | Metcalf Last Name | | | |
| Debto | | | | | | | |
| (Spous | se, if filing) | First Name | Middle Name | Last Name | | | |
| United | d States Ba | ankruptcy Court for the: | Northern | District of Illinois | | | |
| Case (If knov | number | | | (State) | | | |
| <u> </u> | | orm 106D | | | | | Check if this is a |
| | | | ors Who Hav | ve Claims Secure | ed by Prop | | 12/1: |
| Be as more | complete space is n | and accurate as possib | le. If two married people | e are filing together, both are equal ber the entries, and attach it to t | ally responsible for s | supplying correct info | |
| 1. I | Do any cr | editors have claims se | cured by your propert | y? | | | |
| [| No. Ch | heck this box and subm | it this form to the court v | vith your other schedules. You hav | e nothing else to rep | ort on this form. | |
| į | ✓ Yes. F | ill in all of the information | n below. | | | | |
| Part | 1: List A | II Secured Claims | | | | | |
| 2. | | ecured claims. If a credit | or has more than one sec | ured claim, list the creditor | Column A | Column B | Column C |
| | | | · · | icular claim, list the other creditors order according to the creditor's | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 | Speedy C | | Describe the property | that secures the claim: | \$800.00 | \$2,600.00 | \$0.00 |
| | Creditor's N 1931 N. I | Mannheim Rd | 2006 Volkswagen Jetta | | | | |
| | Number | r Street | | the claim is: Check all that apply. | | | |
| | | | Contingent | | | | |
| | Melrose I | Park IL 60160 State ZIP Code | Unliquidated | | | | |
| | • | s the debt? Check one. | Disputed | | | | |
| | ✓ Debto | or 1 only | Nature of lien. Check a | ll that apply. | | | |
| | | or 2 only | An agreement you r car loan) | made (such as mortgage or secured | | | |
| | | or 1 and Debtor 2 only | Statutory lien (such | as tax lien, mechanic's lien) | | | |
| | | ast one of the debtors another | Judgment lien from | a lawsuit | | | |
| | | ck if this claim relates community debt | Other (including a rig | ght to offset) | | | |
| | Date deb | - | Last 4 digits of accoun | nt number | | | |
| 2.2 | | orts Vacation Club hip Program | Describe the property | that secures the claim: | \$7,000.00 | \$7,000.00 | \$0.00 |
| | Creditor's N | | | ain Street, Las Vegas, NV 89101 the claim is: Check all that apply. | | | |
| | Number | | Contingent | the Claim is. Oneck all that apply. | | | |
| | | | Unliquidated | | | | |
| | Las Vega | | Disputed | | | | |
| | City Who owe | State ZIP Code es the debt? Check one. | Nature of lien. Check a | Il that apply | | | |
| | | or 1 only | _ | nade (such as mortgage or secured | | | |
| | Debto | or 2 only | car loan) | nade (such as mongage of secured | | | |
| | Debto | or 1 and Debtor 2 only | Statutory lien (such | as tax lien, mechanic's lien) | | | |
| | | ast one of the debtors | Judgment lien from | a lawsuit | | | |
| | | another ck if this claim relates | Other (including a rig | ght to offset) | | | |
| | | community debt | Last 4 digits of accour | nt number | | | |
| | ı | Add the dollar value of y | our entries in Column A | on this page. Write that number | \$7,800.00 | | |

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| | | | | 9 | | | | |
|---------------|--|---|--|--|--|----------------------------|----------------------------------|-------------------------------|
| Filli | n this infor | mation to identify your c | ase: | | | | | |
| Deb | otor 1 | Anita | | Metcalf | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | tor 2 | | | | | | | |
| (Spo | use, if filing) | First Name | Middle Name | Last Name | | | | |
| Unit | ted States B | ankruptcy Court for the: | Northern | District of Illinois | | | | |
| Cas | e number | | | (State) | | | | |
| (If kn | | | | | | | | |
| Off | ficial F | orm 106E/F | | | | Che | ck if this is an | n amended filing |
| | | | ditors Who | Have Unse | cured Claims | | | 12/15 |
| Form clain | n 106Å/B) ans that are entries in the vn). | and on Schedule G: Exe listed in Schedule D: C he boxes on the left. At | cutory Contracts and Une reditors Who Hold Claims | xpired Leases (Official Secured by Property. I | Also list executory contracts Form 106G). Do not include a f more space is needed, copy top of any additional pages, v | ny creditor the Part yo | s with partia ou need, fill i | ally secured t out, number |
| 1. | Do any cr | editors have priority un | secured claims against ye | ou? | | | | |
| | ✓ No. 0 | Go to Part 2. | | | | | | |
| | Yes. | | | | | | | |
| 2. | listed, ider As much a Continuati | ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor | is. If a claim has both priority | y and nonpriority amount ling to the creditor's nam particular claim, list the otl | | both priority | and nonprio | rity amounts. |
| | | | | | | Total | Priority | Nonpriority |
| | | | | | | claim | amount | amount |

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Debtor 1 Anita Metcalf Case number (if known) First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **V** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** AFS ACCEPTANCE LLC 4.1 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 101 NE 3rd Ave When was the debt incurred? 7/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Fort Lauderdale 33301 Florida City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ Notice Only Is the claim subject to offset? No Yes AT&T \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 105262 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 30348 Atlanta Georgia Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Past Due Bill Is the claim subject to offset? **✓** No Yes 4.3 Check 'n Go \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 7101 W North Ave n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60302 Oak Park Illinois City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Pay Day Loan Is the claim subject to offset? Official Yes 106E/F Schedule E/F: Creditors Who Have Unsecured Claims page 2

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 Debtor 1 First Name
 Anita
 Metcalf
 Case number (if known)

 Last Name
 Last Name

| | After listing any entries on this page, number them beginning | g with 4.5, followed by 4.6, and so forth. | Total claim |
|---|--|---|----------------|
| 1 | COLLINS ASSET GROUP | Lock 4 digite of account number 1000 | \$8,614.00 |
| | Nonpriority Creditor's Name | Last 4 digits of account number 1980 | |
| | 5725 W Highway 290 103-3 Number Street | When was the debt incurred? 6/2017 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Austin Texas 78735 City State Zip Code | — Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | 님 | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | 001 Collection; Collecting for ORIGINAL CREDITOR: HOWARD | |
| | ✓ No | Other. Specify AUTO GROUP INC | |
| | Yes | | |
| 5 | Comcast | — Last 4 digits of account number | \$747.22 |
| | Nonpriority Creditor's Name 11621 E. Marginal Way # 5 | When was the debt incurred? n/a | |
| | Number Street | | |
| | Bankruptcy Dept | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Seattle Washington 98168 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | <u> </u> | Obligations arising out of a separation agreement or | |
| | Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Other. Specify Past Due Bill | |
| | Is the claim subject to offset? | <u> </u> | |
| | ✓ No | | |
| | Yes | | |
| _ | | | #440.00 |
| 3 | CREDIT ONE BANK NA Nonpriority Creditor's Name | Last 4 digits of account number 7112 | \$440.00 |
| | PO BOX 98875 | When was the debt incurred? 10/2017 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | LAS VEGAS Nevada 89193 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | <u>'</u> | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | Other. Specify CreditCard | |
| | ✓ No | | |

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| Part 2 | Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page | | | | | |
|--------|--|---|-------------|--|--|--|
| | After listing any entries on this page, number them beginning w | ith 4.5, followed by 4.6, and so forth. | Total claim | | | |
| 4.7 | FSTPROGRESS | Last 4 digits of account number 0247 | \$0.00 | | | |
| | Nonpriority Creditor's Name P.O. BOX 84010 | When was the debt incurred? 6/2017 | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | COLUMBUS Georgia 31908 | Contingent | | | | |
| | City State Zip Code | Unliquidated | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | | | | |
| | <u> </u> | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 and Debtor 2 and | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | At least one of the debtors and another Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Is the claim subject to offset? | Other. Specify CreditCard | | | | |
| | ✓ No | | | | | |
| | Yes | | | | | |
| 4.8 | Illinois Tollway Nonpriority Creditor's Name | Last 4 digits of account number | \$355.60 | | | |
| | 2700 Ogden Ave | When was the debt incurred?n/a | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | Legal Dept | - Contingent | | | | |
| | Downers Grove Illinois 60515 | Unliquidated | | | | |
| | City State Zip Code | Disputed | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | | | | |
| | Check if this claim relates to a community debt | debts Unneid Talla | | | | |
| | Is the claim subject to offset? | Other. Specify Unpaid Tolls | | | | |
| | ✓ No | | | | | |
| | Yes | | | | | |
| 4.9 | Lasik Plus Vision Center | Last 4 digits of account number | \$1,052.16 | | | |
| | Nonpriority Creditor's Name 939 W North Ave | When was the debt incurred? n/a | | | | |
| | Number Street | | | | | |
| | #220 | As of the date you file, the claim is: Check all that apply. — Contingent | | | | |
| | | Unliquidated | | | | |
| | ChicagoIllinois60642CityStateZip Code | Disputed | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | | | | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | | | | |
| | Check if this claim relates to a community debt | debts | | | | |
| | Is the claim subject to offset? | Other. Specify Medical Bill | | | | |
| | No | | | | | |
| | Yes | | | | | |

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Debtor 1 Anita Metcalf Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** PEOPLES ENGY 4.10 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 200 EAST RANDOLPH When was the debt incurred? 6/2006 Number Street As of the date you file, the claim is: Check all that apply. Contingent **CHICAGO** 60601 Illinois Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify InstallmentLoan Is the claim subject to offset? **✓** No Yes 4.11 People's Gas \$781.00 Last 4 digits of account number Nonpriority Creditor's Name 130 E. Randolph Drive When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60601 Chicago City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Unpaid Bill Is the claim subject to offset? **✓** No Yes 4.12 USCB CORPORATION \$875.00 Last 4 digits of account number 2715 Nonpriority Creditor's Name When was the debt incurred? 8/2017 101 HARRISON ST Number Street As of the date you file, the claim is: Check all that apply. Contingent ARCHBALD 18403 Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

✓ No

Yes

Is the claim subject to offset?

V

Other. Specify

001 Collection; Collecting for

ORIGINAL CREDITOR:

ASHWORTH COLLEGE

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Debtor 1 Anita Metcalf Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 Village of Dolton \$100.00 Last 4 digits of account number Nonpriority Creditor's Name 14122 Chicago Road When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60419 Dolton Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify __ Red Light Tickets Is the claim subject to offset? No ◪ ☐ Yes WEBBANK/FINGERHUT \$252.00 Last 4 digits of account number _ 6444 Nonpriority Creditor's Name When was the debt incurred? 8/2017 7075 Flying Cloud Dr Street Number As of the date you file, the claim is: Check all that apply. Contingent Eden Prairie Minnesota 55344 Unliquidated Citv State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes WEBBANK/FINGERHUT FRES \$0.00 Last 4 digits of account number 3812 Nonpriority Creditor's Name When was the debt incurred? 6250 RIDGEWOOD RD Number Street As of the date you file, the claim is: Check all that apply. Contingent SAINT CLOUD 56303 Minnesota Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ 006 InstallmentLoan Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Anita First Name Metcalf Case number (if known)

| Part 4: Add th | e Amounts for Each Type of Unsecured Claim | | | | | | |
|-----------------------------|---|-----|--------------|--|--|--|--|
| 6. Total the a | | | | | | | |
| | | | Total claims | | | | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | | | | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | | | | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | | | | |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 | | | | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 | | | | |
| | | | Total claims | | | | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 | | | | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | | | | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | | | | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$14,216.98 | | | | |
| | 6j. Total. Add lines 6f through 6i. | 6j. | \$14,216.98 | | | | |

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| • | • | | e are filing together, both are equally respo | nsible for supplying correct information. If |
|---------------------------------|-------------------------------|-------------|---|--|
| Schedu | le G: Executor | y Contract | s and Unexpired Lease | 2S 12/15 |
| Official | Form 106G | | | Check if this is ar amended filing |
| Case number (If known) | | | (| |
| United States E | Bankruptcy Court for the: No. | them | District of Illinois (State) | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| Debtor 1 | Anita First Name | Middle Name | Metcalf Last Name | |
| Deblema | Action | | NA at a alf | |

more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or co | mpany with whom you have | the contract or lease | State what the contract or lease is for |
|--|--------------------------|-----------------------|---|
| 2.1 1974 Develop Name 303 W. Madis | | | Residential Lease, Debtor is Lessee, Yearly Residential Lease |
| Number | Street | | |
| Chicago | Illinois | 60606 | |
| City | State | Zip Code | |

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| | | | Do | cument Page 3 | 31 of 69 | 9 |
|-----------------|-----------------------|--|----------------------------------|---------------------------------|------------|---|
| Fill in | this infor | mation to identify your | case: | | | |
| Debto | or 1 | Anita | | Metcalf | | |
| | | First Name | Middle Name | Last Name | | |
| Debto (Spous | or 2 e, if filing) | First Name | Middle Name | Last Name | | |
| United | d States B | Sankruptcy Court for the | Northern | District of Illinois (State) | | |
| | number | | | (Glate) | | |
| (If know | vrij | | | | | Check if this is an |
| | | | | | | amended filing |
| <u>Offi</u> | icial | Form 106H | | | | |
| Sch | edul | e H: Your Co | debtors | | | 12/15 |
| | | | | ots vou mav have. Be as co | omplete a | nd accurate as possible. If two married people are |
| filing t | ogether, | both are equally response | onsible for supplying corre | ct information. If more spa | ace is nee | ded, copy the Additional Page, fill it out, and number |
| | | ne boxes on the leπ. A r every question. | itach the Additional Page | to this page. On the top o | ot any Add | litional Pages, write your name and case number (if |
| 1. | Do vou l | have anv codebtors? | f you are filing a joint case, c | lo not list either spouse as a | codebtor.) | |
| | ☐ No | • , | , | | , | |
| | ✓ Ye | es | | | | |
| 2. | | | | | • | nity property states and territories include Arizona, |
| | | a, Idano, Louisiana, Nev o. Go to line 3. | ada, New Mexico, Puerto Ric | co, Texas, washington, and | vvisconsin | .) |
| | | | rmer spouse, or legal equiv | valent live with you at the tir | me? | |
| | | No | | | | |
| | | Yes. In which comm | unity state or territory did y | ou live? | Fill in tl | he name and current address of that person. |
| | | Name of your analyse | former engine or legal equi | volont | | |
| | | name or your spouse, | former spouse, or legal equi | valent | | |
| | | Number Street | | | | |
| | | City | State | Zip Code | | |
| 3. | | • | _ | • | | use is filing with you. List the person shown in line 2 |
| | - | • | | - | | d the creditor on Schedule D (Official Form 106D), chedule E/F, or Schedule G to fill out Column 2. |
| | Column | 1: Your codebtor | | | Colu | ımn 2: The creditor to whom you owe the debt |
| | | | | | Chec | ck all schedules that apply: |
| 3.1 | Fields, A | ntwan | | | | Schedule D, line 2.2 |
| | Name | | | | — <u>「</u> | · ——— |
| | | 8144 S. Cornell | | | | Schedule E/F, line |

60617

Zip Code

Schedule G, line

Number

Chicago

City

Street

Illinois

State

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| Fill in this in | formation to identify | your case: | | - | | | | |
|--------------------------------|---|---|--------------------------|------------------------|-------------------|--|----------|---------------|
| Debtor 1 | Anita First Name | Middle Name | Metca Last N | | — Che | eck if this is: | | |
| Debtor 2 (Spouse, if filing | First Name | Middle Name | Last N | ame | - 🗆 | An amended filing | | |
| the: Case number | Bankruptcy Court for | Northern | _ District of Illi (S | nois State) | - " | A supplement showing expenses as of the foll | , , , | on chapter 13 |
| (If known) | | | | | | MM / DD / YYYY | | |
| | Form 106l | | | | | | | |
| <u>Schedu</u> | le I: Your In | come | | | | | | 12/15 |
| spouse. If mo number (if kr | | • | | | | | | |
| Fill in you information | ır employment | | Debtor 1 | | | Debtor 2 | | |
| If you hav attach a se | e more than one job, eparate page with n about additional | Employment status | Emplo | yed mployed | | Employed Not Employed | | |
| employers | | Occupation | Nurse Assi | istant | | | | |
| Include pa self-emplo | art time, seasonal, or byed work. | Employer's name | Holy Famil | ly Villa | | _ | | |
| | n may include student aker, if it applies. | Employer's address | 12220 S. Number Str | Will Cook Road reet | | Number Street | | |
| | | | Palos Park City | Illinois State | 60464 Zip Code | City | State Zi | p Code |
| | | How long employed there? | 10 years 1 | month | | | _ | |
| Part 2: Given | ve Details About N | Ionthly Income | | | | | | |
| spouse unles | ss you are separated. | he date you file this form one more than one employer, et to this form. | - | | - | • | | |
| | , | | | For | Debtor 1 | For Debtor 2 or non-filing spouse | | |
| | | ary, and commissions (befo calculate what the monthly | | 2. | \$3,428.75 | | _ | |
| 3. Estimat | e and list monthly over | time pay. | | 3. | + \$0.00 | | | |
| 4. Calcula | te gross income. Add li | ne 2 + line 3. | | 4. | \$3,428.75 | | | |

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| First Name Middle Name Last Name Known) Copy line 4 here | Metcalf Case number (if Middle Name Last Name known) |
|--|---|
| Copy line 4 here 4. \$3,428.75 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$243.19 5f. \$0.00 5g. Union dues 5g. \$0.00 5h. + \$0.00 5h. + \$0.00 5g. Union dues 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g +5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and business showing gross receipts, ordinary and necessary business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. \$0.00 8d. \$0.00 8d. \$0.00 8f. Other government assistance that you regularly receive include cash assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (in any non-cash assistance that you receive, such as food stamps (in any non-cash assistance that you receive, such as food stamps (in any non-cash assistance that you receive, such as food stamps (in any non-cash assistance that you receive, such as food stamps (in any non-cash assistance that you receive, such as food stamps (in any non-cash assistance that you receive, such as food stamps (in any non-cash assistance that you receive, such as food stamps (in any non-cash assistance that you receive, such as food stamps (in any non-cash assistance that you receive, such as food stamps (in any non-cash assistance that you receive, such as food stamps (in any non-cash assistance that you receive, such as foo | For Debtor 1 For Debtor 2 or |
| 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. \$390.63 5b. Mandatory contributions for retirement plans 5c. \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$243.19 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. Other deductions. Specify: 5h. Other deductions. Specify: 5h. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g 45h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Social Security 8f. Other government assistance that you regularly receive include cash assistance that you receive, such as food stamps (include cash assistance and the value (if known) of any non-cash assistance and the value (if known) of any non-cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (include cash assistance that you receive, such as food stamps (include cash assistance that you receive, such as food stamps (include cash assistance that you receive, such as food stamps (include cash assistance that you receive, such as food stamps (include cash assistance that you receive, such as food stamps (include cash assistance that you receive, such as food stamps (include cash assistance that you receive, such as food stamps (include cash assistance that you receive, such as food stamps (| 4 \$2.429.75 |
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| 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. + \$0.00 5h. + \$0.00 5h. Other deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g 5h. + \$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g 6. \$684.52 4. Start all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any noncash assistance that you receives, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies | irement plans 5c. \$0.00 |
| 5f. Domestic support obligations 5g. Union dues 5g. Union dues 5h. Other deductions. Specify: 5h. + \$0.00 + \$0 | ment fund loans 5d. \$0.00 |
| 5g. Union dues 5h. Other deductions. Specify: 5h. + \$0.00 + \$ 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g | |
| 5h. Other deductions. Specify: 5h. + \$0.00 + \$ | 5f. \$0.00 |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g 6. \$684.52 + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$2,744.24 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies | 5g. \$0.00 |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g | 5h. + \$0.00 + |
| 8a. Net income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies | |
| 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies | e pay. Subtract line 6 from line 4. 7. \$2,744.24 |
| business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$0.00 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies | eived: |
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| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies | essary business expenses, and |
| dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies | 8b. \$0.00 |
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| 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies | 8d. \$0.00 |
| Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies | 8e. \$0.00 |
| | value (if known) of any non- such as food stamps (benefits Assistance Program) or |
| 8f. \$0.00 | |
| 8g. Pension or retirement income 8g. \$0.00 | · |
| 8h. Other monthly income. Specify: Pro-Rated Income Tax Refund 8h. + \$22.00 + | |
| 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$22.00 | 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$22.00 |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse | |
| 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. | rried partner, members of your household, your dependents, your roommates, and other |
| | |
| | 40.00 |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies \$2,76 | |
| Combined monthly inco | Combined monthly income |
| 13. Do you expect an increase or decrease within the year after you file this form? No. | crease within the year after you file this form? |
| | 7 |
| Yes. Explain: | |

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| | | Docu | iment Page 34 of 69 | | | |
|---|--|---|---|------------------------------------|-----------------------|-------------|
| Fill in this infor | mation to identify your c | ase: | | | | |
| Debtor 1 | Anita | | Metcalf | | | |
| Dobtor 0 | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filing | g | |
| United States E | Bankruptcy Court for the: | Northern [| District of Illinois | A supplement sh expenses as of the | | • |
| Case number (If known) | | | (State) | MM / DD / YYYY | | |
| Official | Form 106J | | | | | |
| | e J: Your Exp | enses | | | | 12/15 |
| Part 1: Des 1. Is this a joi No. Go | o to line 2 oes Debtor 2 live in a se | eparate household? | nses for Separate Household of Debto | or 2. | | |
| 2. Do you hav | e dependents? 🗸 No |) | | | | |
| Do not list Debtor 2. | | es. Fill out this information for ach dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does depend with you? | ent live |
| expenses o than yourself an dependents | - | es | | | | |
| | of a date after the bank | | you are using this form as a supple plemental Schedule J, check the | | | |
| | | ash government assistance it on Schedule I: Your Income | | | Yo | ur expenses |
| | or home ownership ex or the ground or lot. 4. | penses for your residence. In | nclude first mortgage payments and | | 4. | \$750.00 |
| If not incl | uded in line 4: | | | | | |
| 4a. Real e | state taxes | | | | 4a | \$0.00 |
| 4b. Prope | rty, homeowner's, or rent | er's insurance | | | 4b. | \$0.00 |

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

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 Debtor 1 First Name
 Anita
 Metcalf
 Case number (if known)

 Last Name
 Last Name

| | | Your expenses |
|---|-----|---------------|
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. | \$325.00 |
| 6b. Water, sewer, garbage collection | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$310.00 |
| 6d. Other. Specify: | 6d | \$0.00 |
| 7. Food and housekeeping supplies | 7. | \$410.00 |
| 8. Childcare and children's education costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry cleaning | 9. | \$70.00 |
| 10. Personal care products and services | 10. | \$100.00 |
| 11. Medical and dental expenses | 11. | \$35.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments | 12. | \$277.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions and religious donations | 14. | \$0.00 |
| 15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a | \$0.00 |
| 15b. Health insurance | 15b | \$0.00 |
| 15c. Vehicle insurance | 15c | \$164.00 |
| 15d. Other insurance. Specify: | 15d | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| Specify: | 16 | \$0.00 |
| 17. Installment or lease payments: | | |
| 17a. Car payments for Vehicle 1 | 17a | \$175.00 |
| 17b. Car payments for Vehicle 2 | 17b | \$0.00 |
| 17c. Other. Specify: | 17c | \$0.00 |
| 17d. Other. Specify: | 17d | \$0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from | | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | |
| 19.Other payments you make to support others who do not live with you. | 40 | |
| Specify: 20 Other real property expenses not included in lines 4 or 5 of this form or on Schodule II Your Income | 19. | \$0.00 |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property | 20a | \$0.00 |
| 20b. Real estate taxes. | 20b | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses. | 20d | \$0.00 |
| 20e. Homeowner's association or condominium dues | 20e | |

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| Debtor 1 | | | | Metcalf | Case number (if known) | | |
|-------------------|----------|------------------------|---------------------------|--|------------------------|-----|------------|
| | First Na | ame | Middle Name | Last Name | | | |
| 21.Other | r. Speci | ify: | | | | 21 | \$0.00 |
| | | | | | | | |
| | - | our monthly expens | ses. | | | | \$2,616.00 |
| | | es 4 through 21. | | | | | \$0.00 |
| | | , , , | ,, , | from Official Form 106J-2 | | | \$2,616.00 |
| 22c. A | Add line | e 22a and 22b. The re | esult is your monthly exp | enses. | | 22. | |
| 23.Calcu | ılate y | our monthly net inc | ome. | | | | |
| 23a. (| Copy lir | ne 12 (your combined | d monthly income) from | Schedule I. | | 23a | \$2,766.24 |
| 23b. (| Сору у | our monthly expense | s from line 22 above. | | | 23b | \$2,616.00 |
| | | | ises from your monthly in | ncome. | | | \$150.24 |
| • | The res | sult is your monthly n | et income. | | | 23c | |
| 24. Do y o | ou exp | ect an increase or d | decrease in your expen | ses within the year after y | ou file this form? | | |
| • | • | | | | | | |
| | | | | oan within the year or do yo nodification to the terms of | | | |
| | No | | | | | | |
| <u>~</u> | •• | | | | | | |
| | es [| | | | | | |
| | | Explain here: | | | | | |
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| Debtor 1 | Anita | Metcalf | |
|------------------------|---------------------------|-------------|----------------------|
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | | | | | | |
|-----|--|---|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | |
| | ✓ No | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and | | | | | |
| × | /s/ Anita Metcalf | × | | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | | |
| | Date 4/10/2018 | Date | | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | | |

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| Fill <u>i</u> r | n this inf <u>o</u> r | rmation to identify your c | ase: | | | | | |
|-----------------|--------------------------|-------------------------------------|-----------------------|---|------------------|----------|----------|----------------------------|
| Debt | | Anita | | Metcalf | | | | |
| 200 | | First Name | Middle N | | е | | | |
| Debt (Spou | tor 2 use, if filing) | First Name | Middle N | ame Last Nam | e | | | |
| Unite | ed States E | Bankruptcy Court for the: | Northern | District of Illino | | | | |
| | number | | | (Stat | e) | | | |
| (If kno | wn) | | | | | | | Check if this is a |
| Of | ficial | Form 107 | | | | | | amended filing |
| Sta | iteme | nt of Financia | l Affairs fo | or Individuals | Filing for | r Bankru | ıptcy | 04/1 |
| infor | mation. | | ed, attach a sepa | rried people are filing rate sheet to this form | | | | |
| Part | Give | e Details About Your | Marital Status a | and Where You Lived | Before | | | |
| 1. | What is | your current marital sta | atus? | | | | | |
| | Ма | rried | | | | | | |
| | ✓ Not | t married | | | | | | |
| 2. | During t | the last 3 years, have yo | u lived anywhere | other than where you li | ve now? | | | |
| | ✓ No | s. List all of the places vo | ou lived in the last | 3 years. Do not include v | where vou live r | now. | | |
| | | , | | . , | | | | |
| | Del | btor 1: | | Dates Debtor 1 lived there | Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| | Nui | mber Street | | From | Number Stre | et | | From |
| | | | | То | | | | То |
| | City | y State | Zip Code | | City | State | Zip Code | |
| | | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| | | | | Form | | | | |
| | Nui | mber Street | | From To | Number Stre | et | | From To |
| | | | | | | | | |
| | City | y State | Zip Code | | City | State | Zip Code | |
| | and territo No | <i>ries</i> include Arizona, Califo | ornia, Idaho, Louisia | ouse or legal equivalent ana, Nevada, New Mexico Codebtors (Official Form | Puerto Rico, Te | | | |

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| | Anita | Metca | | umber (if known) | |
|------------------------------------|---|--|---|--|---|
| | First Name Middle | e Name Last N | ame | | |
| 2: | Explain the Sources of Your Inc | come | | | |
| Fill i | you have any income from employm in the total amount of income you receivities. If you are filing a joint case and yo No Yes. Fill in the details. | ved from all jobs and all bus | sinesses, including part-time | • | years? |
| _ | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | rom January 1 of current year until ne date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | \$10552.53 | Wages, commissions, bonuses, tips Operating a business | |
| | or last calendar year: anuary 1 to December 31, 2017) YYYY | Wages, commissions, bonuses, tips Operating a business | \$36646.19 | Wages, commissions, bonuses, tips Operating a business | |
| | or the calendar year before that: anuary 1 to December 31, 2016) | Wages, commissions, bonuses, tips Operating a business | \$18264.00 | Wages, commissions, bonuses, tips Operating a business | |
| | do in como rogardicos of whather that in | g this year or the two prev | _ | abild augment. Coaid Coough | , unampleument and ath |
| Inclu publi filing List 6 | ide income regardless of whether that in it benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No Yes. Fill in the details. | ncome is taxable. Examples come; interest; dividends; r you received together, list i | of other income are alimony; noney collected from lawsuits; t only once under Debtor 1. | royalties; and gambling and | |
| Inclu publi filing List | lic benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No | ncome is taxable. Examples come; interest; dividends; r you received together, list i | of other income are alimony; noney collected from lawsuits; t only once under Debtor 1. | royalties; and gambling and | |
| Inclu publi filing List | lic benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No | ncome is taxable. Examples come; interest; dividends; r you received together, list in each source separately. Do | of other income are alimony; noney collected from lawsuits; t only once under Debtor 1. | royalties; and gambling and listed in line 4. | Gross income from each source |
| Inclupublifiling | lic benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No | ncome is taxable. Examples come; interest; dividends; r you received together, list in each source separately. De Debtor 1 Sources of income | Gross income from each source (before deductions) | royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income from each source (before deductions are |
| Inclupublifiling List c | lic benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No Yes. Fill in the details. | ncome is taxable. Examples come; interest; dividends; r you received together, list in each source separately. De Debtor 1 Sources of income | Gross income from each source (before deductions) | royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income from each source (before deductions ar |

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Debtor 1 Anita Metcalf Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment Dates of payment Total amount paid Amount you still owe for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City Suppliers or State Zip Code vendors

Other

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| r 1 | Anita | | | M | etcalf | Case number | (if known) |
|------------|--|------------|--|--|---|---|--|
| | First Name | | Middle Name | Las | st Name | | |
| nsi orp | thin 1 year before you filed for bankruptcy, or iders include your relatives; any general partners porations of which you are an officer, director, pent, including one for a business you operate as the as child support and alimony. | | s; relatives of any person in control | general partners; pa , or owner of 20% of | artnerships of which yor more of their voting | ou are a general partner; g securities; and any managing | |
| ✓ | No | | | | | | |
| | Yes. List all pay | ments to a | an insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| _ | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | hin 1 year before der? | you filed | for bankruptcy, | did you make an | y payments or trai | nsfer any property o | on account of a debt that benefited an |
| | | debts gua | ranteed or cosigne | ed by an insider. | | | |
| ✓ | No | | | | | | |
| | Yes. List all pay | ments tha | t benefited an ins | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | | | | | | | Include creditor's name |
| | Insider's Name | | | - | | | |
| | Number Street | | | | | | |
| | - Compos Offices | | | | | | |
| _ | City | State | Zip Code | | | | |
| | Insider's Name | | | | | <u> </u> | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |

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Debtor 1 Anita Metcalf Case number (if known) First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | otor 1 Anita | Metcalf | Case number (if known) | |
|------|--|--------------------------------------|--|-----------------------|
| | First Name Middle Name | Last Name | | |
| 11. | Within 90 days before you filed for bankrupto accounts or refuse to make a payment beca | | ank or financial institution, set off any am | ounts from your |
| | ✓ No Yes. Fill in the details. | | | |
| | | Describe the action the | e creditor took Date action was taken | Amount |
| | Creditor's Name | | | |
| | Number Street | | | |
| | | Last 4 digits of account r | number: XXXX- | |
| | City State Zip Code | e | | |
| 12. | Within 1 year before you filed for bankruptcy appointed receiver, a custodian, or another | | possession of an assignee for the benefit o | f creditors, a court- |
| | ✓ No ☐ Yes | | | |
| Part | | | | |
| rait | List oci talli alits alia conti ibationis | | | |
| 13. | Within 2 years before you filed for bankrupt | cy, did you give any gifts with a to | otal value of more than \$600 per person? | |
| | No Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$60 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | |
| | Person to Whom You Gave the Gift | | | - |
| | Number Street | | | |
| | City State Zip Code | <u></u> e | | |
| | Person's relationship to you | | | |
| | Person to Whom You Gave the Gift | | | |
| | | | | |
| | Number Street | | | |
| | City State Zip Code | e e | | |
| | Person's relationship to you | | | |

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| ebtor 1 | Anita | | Metcalf | Case number (if kno | vn) | |
|---------|--|---|---|-----------------------------|-----------------------------------|----------------------|
| | First Name Middle | e Name | Last Name | | | |
| | | | | | | |
| 4. Wit | thin 2 years before you filed for bank | ruptcy, did y | ou give any gifts or contribu | tions with a total value | of more than \$600 | to any charity? |
| _ | | | 0 ,0 | | | • |
| ✓ | No | | | | | |
| 一 | Yes. Fill in the details for each gift o | r contribution | ٦. | | | |
| | Tool I iii ii i are dotaile for odori girt o | | | | | |
| | Gifts or contributions to charities | | Describe what you contr | buted | Date you | Value |
| | that total more than \$600 | | | | contributed | |
| | | | | | | |
| | - | | | | | |
| | Charity's Name | | | | | |
| | | | | | | |
| | | | | | | |
| | Number Street | | | | | |
| | Number Street | | | | | |
| | - | | | | | |
| | City State Zip | o Code | | | | |
| | | | | | _ | |
| rt 6: | List Certain Losses | | | | | |
| | | | | | | |
| | Yes. Fill in the details. Describe the property you lost and | l | Describe any insurance | | Date of your | Value of property |
| | how the loss occurred | | Include the amount that in pending insurance claims (A/B: Property. | | loss | lost |
| | | | | | | |
| | | | | | | |
| | | _ | | | | |
| art /: | List Certain Payments or Trans | olei 2 | | | | |
| abo | hin 1 year before you filed for bankrout seeking bankruptcy or preparing bude any attorneys, bankruptcy petition | a bankrupto | y petition? | | | anyone you consulted |
| abo | out seeking bankruptcy or preparing | a bankrupto | y petition? | | | anyone you consulted |
| abo | out seeking bankruptcy or preparing lude any attorneys, bankruptcy petition | a bankrupto | y petition? | services required in your b | | Amount of payment |
| abo | out seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No Yes. Fill in the details. | a bankrupto | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | but seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm | a bankrupto | ey petition? credit counseling agencies for Description and value of | services required in your b | Date payment or transfer | Amount of |
| abo | out seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | a bankrupto | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | out seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | a bankrupto | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | out seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | a bankrupto | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | out seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | a bankrupto | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | out seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | a bankrupto | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | a bankrupto | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 66 | a bankrupto preparers, or | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 66 | preparers, or | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 66 City State Zig | preparers, or | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 66 | preparers, or | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zig Email or website address | preparers, or 0643 | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 66 City State Zig | preparers, or 0643 | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zig Email or website address | preparers, or 0643 | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zig Email or website address Person Who Made the Payment, if No | preparers, or 0643 | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zig Email or website address | preparers, or 0643 | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6i City State Zip Email or website address Person Who Made the Payment, if No | preparers, or 0643 | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zig Email or website address Person Who Made the Payment, if No | preparers, or 0643 | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6i City State Zip Email or website address Person Who Made the Payment, if No | preparers, or 0643 | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6i City State Zip Email or website address Person Who Made the Payment, if No | preparers, or 0643 | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6i City State Zip Email or website address Person Who Made the Payment, if No | preparers, or one of the preparers of the | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6i City State Zip Email or website address Person Who Made the Payment, if No | preparers, or 0643 | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6i City State Zip Email or website address Person Who Was Paid Number Street Chicago Illinois 6i City State Zip Email or website address Person Who Was Paid Number Street | preparers, or one of the preparers of the | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6i City State Zip Email or website address Person Who Made the Payment, if No | preparers, or one of the preparers of the | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6i City State Zip Email or website address Person Who Was Paid Number Street Chicago Illinois 6i City State Zip Email or website address Person Who Was Paid Number Street | 0643 o Code | ey petition? credit counseling agencies for Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment |

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| help you deal with your cred | Middle Name | Last Name | - | | |
|---|-------------------------|--|-------------------------|---|------------------------------|
| help you deal with your cred | | | | | |
| Do not include any payment of | | | nalf pay or transfer a | ny property to anyo | ne who promised t |
| √ No | | | | | |
| Yes. Fill in the details. | | | | | |
| | | Description and value of any protransferred | | Date An payment or transfer was made | nount of payment |
| Person Who Was Paid | | - | | | |
| Number Street | | | | | |
| City State | Zip Code | - | | | |
| and transfers that you have alr | and transfers made as s | security (such as the granting of a secur | ty interest or mortgage | e on your property). C | o not include gifts |
| Yes. Fill in the details. | | | | | |
| | | Description and value of propert transferred | | property or eived or debts paid | Date transfer was made |
| Person Who Received Tra | ansfer | - | | | |
| Number Street | | | | | |
| City State Person's relationship to y | • | - | | | |
| Person Who Received Tra | ansfer | - | | | |
| Number Street | | | | | |
| City State Person's relationship to y | • | | | | |
| 9. Within 10 years before you f beneficiary? (These are often called asset-p | | d you transfer any property to a self- | settled trust or simila | ar device of which y | ou are a |
| ✓ No ✓ Yes. Fill in the details. | | | | | |
| 133.1 110 dotains. | | Description and value of the pr | operty transferred | | Date transfer was made |
| Name of trust | | | | | |

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Debtor 1 Anita Metcalf Case number (if known) First Name Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

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Debtor 1 Anita Metcalf Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

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| Deb | tor 1 | | | | | tcalf | Ca | se number <i>(i</i> | f known) | | |
|------|----------|----------------------------|-----------------|-------------------|----------------|----------------|--------------------|---------------------|----------------------------------|-------------|--------------------|
| | | First Name | | Middle Name | Las | t Name | | | | | |
| 26. | Hav | e you been a party | y in any judici | al or administ | rative procee | eding under | any environme | ental law? Ir | nclude settlements | s and order | S. |
| | | No Yes. Fill in the det | ails. | | | | | | | | |
| | | | | | Court or age | ency | | Nature | of the case | | Status of the case |
| | | Case title | | | Court Name | | | | | | Pending |
| | | Case number | | | NumberStree | t | | | | | On appeal |
| | | | | | City | State | Zip Code | | | | Concluded |
| Part | t 11: | Give Details Ab | oout Your B | usiness or Co | onnections | to Any Bu | siness | | | | |
| 27. | Witl | nin 4 years before | you filed for b | ankruptcy, did | d you own a l | ousiness or | have any of the | e following o | connections to any | y business? | |
| | | | | | - | | r activity, either | | part-time | | |
| | | A member of A partner in a | | lity company (l | _LC) or limite | d liability pa | artnership (LLP) | | | | |
| | | ш . | | naging executiv | e of a corpo | oration | | | | | |
| | | An owner of a | at least 5% of | the voting or e | equity securit | ies of a corp | poration | | | | |
| | ✓ | No. None of the a | | | | | | | | | |
| | | Yes. Check all that | at apply abov | e and fill in the | | | | | Formieron Identi | : | mban Da mat |
| | | | | | Descri | be the nati | ure of the busin | less | Employer Identi include Social S | | |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | — Name | of account | ant or bookkee | per | Dates business | existed | |
| | | City | State | Zip Code | | | | | From | _To | |
| | | | | | | | | | | | |
| | | | | | Descri | be the natu | ure of the busin | ess | Employer Identi include Social S | | |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | _ | | | | Dates business | existed | |
| | | City | State | Zip Code | Name | of account | ant or bookkee | per | From | To | |
| | | , | | | | | | | 110111 | _ 10 | |
| | | | | | | | | | | | |
| | | | | | Descri | be the natu | ure of the busin | ess | Employer Identi include Social S | | |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | — Name | of account | ant or bookkee | per | Dates business | existed | |
| | | City | State | Zip Code | _ | | | | From | _То | |
| | | | | | | | | | | | |

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| Deb | otor 1 | Anita | | Metcalf | Case number (if known) |
|-----|--------|----------------------------|-------------------------------|--------------------------------|---|
| | | First Name | Middle Name | Last Name | - |
| 28. | | ditors, or other parties. | | give a financial statement t | o anyone about your business? Include all financial institutions, |
| | | Yes. Fill in the details b | elow. | | |
| | | | | Date issued | |
| | | - | | WW/DD 0000/ | |
| | | Name | | MM/DD/YYYY | |
| | | Number Street | | | |
| | | | | | |
| | | City Sta | ate Zip Code | | |
| 000 | t 12: | Sign Below | | | |
| | true a | and correct. I understar | nd that making a false stater | nent, concealing property, | s, and I declare under penalty of perjury that the answers are or obtaining money or property by fraud in connection with rears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | /s/ Anita | Metcalf | × | |
| | | Signature of | | | Signature of Debtor 2 |
| | | Data 4/40/0 | 2010 | | Date |
| | | Date 4/10/2 | 2018 | | |
| | Did yo | ou attach additional pa | ges to Your Statement of Fir | nancial Affairs for Individual | s Filing for Bankruptcy (Official Form 107)? |
| | V | lo | | | |
| | ☐ Y | ´es | | | |
| | Did yo | ou pay or agree to pay | someone who is not an attor | ney to help you fill out bank | cruptcy forms? |
| | V | lo | | | |
| | _ Y | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Normem | District of Illinois | | |
|-----|--|------------------------|------------------------------|-------------------|------------------------------|
| re_ | Anita Metcalf | | (| Case No. | |
| | Debtor | | , | Shantar | (If known) |
| | | | | Chapter | Chapter 13 |
| | DISCLOSURE OF | COMPENSA | ATION OF ATTO | PRNEY F | OR DEBTOR |
| 1. | . Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf | year before the filing | of the petition in bankrup | tcy, or agreed to | be paid to me, for services |
| | For legal services, I have agreed to ac | cept | | | \$4,000.00 |
| | Prior to the filing of this statement I h | ave received | | | \$0.00 |
| | Balance Due | | | | \$4,000.00 |
| 2 | . The source of the compensation paid | to me was: | | | |
| | ✓ Debtor | Other (s | specify) | | |
| 3 | . The source of the compensation paid | to me is: | | | |
| | ✓ Debtor | Other (s | specify) | | |
| 4 | I have not agreed to share the abomembers and associates of my la | | ensation with any other pe | rson unless the | y are |
| | I have agreed to share the above- members or associates of my law the people sharing in the comper | firm. A copy of the | | | |
| 5 | . In return for the above-disclosed fee, a. Analysis of the debtor's finand bankruptcy; | • | | | |
| | b. Preparation and filing of any p | petition, schedules, s | statements of affairs and pl | an which may b | pe required; |
| | c. Representation of the debtor | at the meeting of cre | ditors and confirmation he | aring, and any a | adjourned hearings thereof; |
| | d. Representation of the debtor | n adversary proceed | lings and other contested b | oankruptcy matt | ters; |
| 6 | . By agreement with the debtor(s), the a | above-disclosed fee | does not include the follow | ving services: | |
| | | | | | |
| | | CE | RTIFICATION | | |
| | certify that the foregoing is a completor(s) in this bankruptcy proceedings. | e statement of any a | greement or arrangement fo | or payment to n | ne for representation of the |
| | 4/10/2018 | | /s/ Alici | a Haro | |
| | Date | | Signature o | f Attorney | _ |
| | | | Semrad L | .aw Firm | |
| | - | | Name of | | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor.* If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$61.76 for expenses, leaving a balance due of \$4,371.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Debtor(s | :) | | | Attorney for De | ebtor(s) |
|-----------|------------|-------|--------|-----------------|------------|
| | | | | /s/ Alicia Haro | alicultano |
| /s/ Anita | Metcalf | ameta | Melcal | | A 41 1 1 1 |
| Signed: | | 1 -0 | 0 | | |
| Date: | 4/9/2018 | | | | |

Do not sign if the fee amounts at top of this page are blank.

THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

700 ·

Re: Agreement Regarding Priority Treatment of The Semrad Law Firm LLC's Fees and Expenses

Dear Client,

Thank you for choosing The Semrad Law Firm LLC (the Firm) to represent you in connection with your Chapter 13 bankruptcy case. In addition to the terms contained in the Court Approved Retention Agreement (CARA) it is our policy to confirm in writing how and when the Firm's fees and expenses will be paid. If there are any terms contained in this document that are in conflict with CARA, those terms are void.

Aside from any initial retainer that you pay the Firm, you will be required by pay the Firm's fees and expenses through the Chapter 13 plan after it is approved by the Bankruptcy Court. Each month, you will pay the Trustee the amount stated in your Chapter 13 plan. The Trustee will then disburse that money out according to the provisions of your plan to the Firm and other creditors.

The model Chapter 13 plan gives fourth priority to attorneys' fees, after the Trustee's fees, current mortgage payments, and payments to secured creditors listed in Section E, Paragraph 3.1 (for example, payments due to lenders on a loan to purchase a car, furniture, appliance or other item of personal property). The Firm intends to alter this priority scheme by modifying the model Chapter 13 plan to provide for payment of the Firm's attorney's fees and costs before any payments are made to your other creditors. That means that the money you send to the Trustee each month will first be paid to the Firm and may minimally pay the claims of your other creditors until the Firm's fees and expenses are paid in full. Such claims of other creditors include your car note, other financed personal property, parking tickets, taxes, and any claims of other creditors that may be included in your plan.

Aside from the Firm's commitment to perform any and all work reasonably necessary to represent you in this bankruptcy case without requiring you to pay a substantial amount of the fees and expenses up front, there is no benefit to you from this priority treatment of the Firm's fees and expenses. Furthermore, this arrangement presents certain risks. In the event that your case is dismissed before completion of the plan or if you decide to convert your case to a case under Chapter 7, it is likely that the Firm's attorneys' fees will have been paid while little of your other debts are paid.

In addition, there is the possibility that a creditor or the Trustee may object to the Firm being paid under this altered priority arrangement. In the event of such an objection, the Firm may lower that amount that the Firm will receive each month and increase the monthly payment to such creditor in order to resolve the objection. However, creditors may seek to recover

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THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

additional attorneys' fees as a result of any such objection and you may be required to pay the creditors' additional attorneys' fees over time through the Chapter 13 Plan.

If you do not wish to pay the Firm's attorneys' fees and expenses ahead of your creditors as set forth above, you have the following options:

- a. You can to pay the Firm an upfront retainer of \$1,500 prior to filing your case and elect for the plan to pay your car note (and/or other claims secured by personal property) and mortgage arrears in equal set monthly payments along with the Firm's fees and expenses; or
- b. You can seek representation by another firm under a different payment arrangement.

Please carefully review this letter. If the terms are not consistent with your understanding of our engagement in any respect or if you have any questions concerning the same, please notify us promptly. You can also seek advice from other counsel regarding your rights under this arrangement. Firm policy and a prior court order require that we receive confirmation of your acceptance of these terms in the form of your signature at the bottom of this letter. Please return the signed copy to the Firm as soon as possible.

Very Truly Yours,

THE SEMRAD LAW FIRM LLC

One of its Attorneys

Ineta Metcap

Accepted:

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1.717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Metcalf, Anita | Case No. | |
|-----------------|----------------|---|-------------------------------------|
| Debtor(s) | | 0000 110. | |
| | | Chapter. | Chapter13 |
| | VERIF | ICATION OF CREDITOR MAT | RIX |
| Ti knowledge | • | rify that the attached list of creditors is tru | ue and correct to the best of their |
| Date: | 4/10/2018 | /s/ Metcalf, Anita | |
| | | Metcalf, Anita <i>Signature of Deb</i> i | tor |

AFS ACCEPTANCE LLC P.O. Box 189007 Plantation, FL, 33318

COLLINS ASSET GROUP 5725 W Highway 290 103-3 Austin, TX, 78735

USCB CORPORATION 101 HARRISON ST ARCHBALD, PA, 18403

CREDIT ONE BANK NA PO BOX 98875 LAS VEGAS, NV, 89193

WEBBANK/FINGERHUT 7075 Flying Cloud Dr Eden Prairie, MN, 55344

FSTPROGRESS P.O. BOX 84010 COLUMBUS, GA, 31908

WEBBANK/FINGERHUT FRES 6250 RIDGEWOOD RD SAINT CLOUD, MN, 56303

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO, IL, 60601

Speedy Cash Po Box 101928 Birmingham, AL, 35210

People's Gas 200 E Randolph St Chicago, IL, 60601

Comcast p.o. box 196 Newark, NJ, 07101 AT&T PO Box 650487 Dallas, TX, 75265

Illinois Tollway PO Box 5544 Chicago, IL, 60680

Village of Dolton 3348 Ridge Rd Municipal Collection of America Lansing, IL, 60438

Lasik Plus Vision Center 939 W North Ave #220 Chicago, IL, 60642

Check `n Go 2491 US Highway 431 N Anniston, AL, 36206

TLC Resorts Vacation Club Membership Program 101 Convention Center Dr Ste 200 Michael J Hayes// Billing Department Las Vegas, NV, 89109

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| Debtor 1 Anita First Name | Metcal Middle Name Last Na | | Der (if known) |
|---|--|---|---|
| | estions for Reporting Purposes | une | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily consummers. "incurred by an individual primarily No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily busi | narily for a personal, family, o iness debts? <i>Business debt</i> s tment or through the operati | s are debts that you incurred to obtain on of the business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | No. I am not filing under Chapter 7. D Yes. I am filing under Chapter 7. D expenses are paid that funds No. Yes. | | empt property is excluded and administrative unsecured creditors? |
| 18. How many creditors do you estimate that you owe? | ☑ 1-49 □ 50-99 □ 100-199 □ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 mi \$100,000,001-\$500 million | ion \$1,000,000,001-\$10 billion Ilion \$10,000,000,001-\$50 billion |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | | \$1,000,001-\$10 millio \$10,000,001-\$50 millio \$50,000,001-\$100 mi \$100,000,001-\$500 m | ion \$1,000,000,001-\$10 billion Ilion \$10,000,000,001-\$50 billion |
| | I have examined this petition, and I | declare under penalty of peri | ury that the information provided is true and |
| For you | correct. If I have chosen to file under Chapte of title 11, United States Code. I under Chapter 7. If no attorney represents me and I described to the control of the con | er 7, I am aware that I may proderstand the relief available oid not pay or agree to pay so | oceed, if eligible, under Chapter 7, 11,12, or 13 under each chapter, and I choose to proceed omeone who is not an attorney to help me fill |
| | out this document, I have obtained | | by 11 U.S.C. § 342(b). States Code, specified in this petition. |
| | I understand making a false stateme | ent, concealing property, or c can result in fines up to \$25 | obtaining money or property by fraud in 0,000, or imprisonment for up to 20 years, or |
| | /s/ Anita Metcalf Signature of Debtor 1 | a Metrolp * | gnature of Debtor 2 |
| | Executed on 4/9/2018 MM / DD / YY | | xecuted on |

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| Fill in this inform | mation to identify your c | ase: | MARKET LINES. | | |
|---------------------------------|---|---------------------------|--|---|---------------------|
| Debtor 1 | Anita | | Metcalf | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| | | | | | |
| United States B | ankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case number | | | (Glate) | | |
| (If known) | | | | | Check if this is ar |
| Official | Form 106De | C. | | | amended filing |
| | 2 3000 3000 3000 3000 3000 3000 3000 30 | - | | | |
| Declarati | on About an | Individual Deb | tor's Schedule | es | 12/15 |
| If two married p | people are filing togeth | er, both are equally resp | onsible for supplying corre | ect information. | |
| money or prope | | | | Making a false statement, concealing pro o \$250,000, or imprisonment for up to 20 | |
| | Below | | | | |
| Did you pa | ay or agree to pay some | eone who is NOT an attor | rney to help you fill out ba | nkruptcy forms? | |
| √ No | | | | | |
| | Name of person | | Attach Bankruptcy Signature (Official | / Petition Preparer's Notice, Declaration, and Form 119). | |
| | | | | | |
| | | | | | |
| | nalty of perjury, I declar are true and correct? | e that I have read the su | ımmary and schedules file | d with this declaration and | |
| 🗶 /s/ Anita | Metcalf (| eta Moto | alo x | | |

Signature of Debtor 2

MM/DD/YYYY

Date

Signature of Debtor 1

Date 4/9/2018 MM/DD/YYYY

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| Debtor 1 Anita | | Metcalf | Case number (if known) |
|--|---|---------------------------------------|--|
| First Name | Middle Name | Last Name | |
| 28. Within 2 years before your creditors, or other parting. No Yes. Fill in the detail | ies. | you give a financial state | ment to anyone about your business? Include all financial institutions, |
| | | Data issued | |
| | | Date issued | |
| Name | | MM/DD/YYYY | _ |
| Number Street | | | |
| | | | |
| City | State Zip Code | | |
| Part 12: Sign Below | | | |
| x /s/Ar | nita Metcalf | o, or imprisonment for up | to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | | Date |
| Date 4/ | /9/2018 | | 2 |
| Did you attach additional | I pages to Your Statement | of Financial Affairs for Ind | lividuals Filing for Bankruptcy (Official Form 107)? |
| No | □ I OSINESSONE ANSOO N. SANJANA CHISTOPHANISHININININININININININININININININININ | | and the second s |
| Yes | | | |
| Did you pay or agree to p | pay someone who is not an a | attorney to help you fill o | ut bankruptcy forms? |
| No No | | • • • • • • • • • • • • • • • • • • • | |
| Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Metcalf, Anita Debtor(s) | Case No | |
|-----------------|---|---|-----------------------------|
| | | Chapter. | Chapter13 |
| | VERIFICATION | OF CREDITOR MATRIX | |
| Tł knowledge | he above named Debtors hereby verify that the e. | attached list of creditors is true and co | orrect to the best of their |
| Date: | 4/9/2018 | /s/ Metcalf, Anita Metcalf, Anita Signature of Debtor | In eta Meleal |

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| Debt | or 1 Anita First Name | Middle Name | Metcalf Last Name | Case number (if known) | |
|---|--|---|----------------------------|---|-------------|
| 16. | Calculate the media | n family income that applies to y | | : | |
| | 16a. Fill in the state in | | Illinois | | |
| | | of people in your household. | 1 | | |
| | | family income for your state and si | ze of | | \$52,410.00 |
| | household | | To find | a list of applicable median income amounts, go online | |
| 17 | How do the lines con | | or this form. This list ma | ay also be available at the bankruptcy clerk's office. | |
| | 17a. 🗸 Line 15b is le | ess than or equal to line 16c. On th | | form, check box 1, <i>Disposable income is not determined</i> on of <i>Disposable Income</i> (Official Form 122C-2). | |
| | U.S.C. § 132 | | Calculation of Dispos | ck box 2, <i>Disposable income is determined under 11</i> able Income (Official Form 122C-2). On line 39 of that | |
| Part | 3: Calculate Your | Commitment Period Under | 11 U.S.C. §1325(b) | (4) | |
| 18. | Copy your total avera | age monthly income from line 11 | • | | \$3,240.18 |
| 19. | | | | s not filing with you, and you contend that calculating the our spouse's income, copy the amount from line 13. | |
| | 19a. If the marital adju | stment does not apply, fill in 0 on I | ine 19a. | | -\$0.00 |
| | 19b. Subtract line 19 | a from line 18. | | | \$3,240.18 |
| 20. | Calculate your curre | nt monthly income for the year. | Follow these steps: | | |
| | 20a. Copy line 19b. | | | | \$3,240.18 |
| | Multiply by 12 (th | e number of months in a year). | | | x 12 |
| | 20b. The result is your | current monthly income for the ye | ar for this part of the fo | rm. | \$38,882.16 |
| | 20c. Copy the median | family income for your state and s | ize of household from I | ine 16c. | \$52,410.00 |
| 21. | How do the lines con | npare? | | | |
| | Line 20b is less the commitment period | an line 20c. Unless otherwise orderd is 3 years. Go to Part 4. | red by the court, on the | e top of page 1 of this form, check box 3, The | |
| | | than or equal to line 20c. Unless ot nt period is 5 years. Go to Part 4. | herwise ordered by the | court, on the top of page 1 of this form, check box | |
| Part | 4: Sign Below | | | | |
| Part | 49 Sign Below | | | | |
| | By signing here, I | declare under penalty of perjury that | at the information on th | is statement and in any attachments is true and correct. | |
| | /s/ Anita M | etcalf (m.d.a. k. | letcoep x | Signature of Debtor 2 | |
| | Date 4/9/20 MM/DI | | | Date MM/DD/YYYY | |
| cas cities dans cities de la manuella constituent en schema | | a, do NOT fill out or file Form 1220 b, fill out Form 122C-2 and file it w | | 9 of that form, copy your current monthly income from lin | e 14 |